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25920 7590 05/18/2005

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01 FC:2501 700.00 OP
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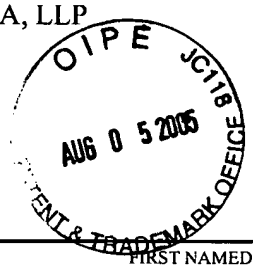

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Kay Harlow	(Depositor's name)
Kay Harlow	(Signature)
August 2, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/684,037	10/09/2003	Ching-Kuang Tzuang	JLINP170	3191

TITLE OF INVENTION: MINIATURIZED MICROWAVE INTEGRATED CIRCUIT USING COMPLEMENTARY CONDUCTING SURFACES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	$700	$300	$1000	08/18/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
GLENN, KIMBERLY E	2817	333-125000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Martine Penilla & Gencarella, LLP
2
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE: National Chiao Tung University

(B) RESIDENCE: (CITY and STATE OR COUNTRY): Taiwan, R.O.C.

Please check the appropriate assignee category or categories (will not be printed on the patent) : ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:
- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
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4b. Payment of Fee(s):
- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0805 (enclose an extra copy of this form).

5. **Change in Entity Status** (from status indicated above) JLINP170
- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____ Date August 2, 2005

Typed or printed name Albert S. Penilla, Esq. Registration No. 39,487

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